By Registered Post

Tele : 01972-272024 Fax : 01972-272907 E-mail : principal@sainikschoolsujanpurtira.org	Sainik School Sujanpur Tira-176 110 Distt. Hamirpur (HP)								
No.SSST/108/4/Adm	Jul 2015								
INTERVIEW FOR THE POST OF DRIVER									
Please refer to your application for the post of Di	iver.								
2. You are to report at 0900 hrs on 22 Jul 2015 (W Principal, Sainik School, Sujanpur Tira for written test for interview along with all original certificates/ testimonials certificates/testimonials.	ollowed by driving test and								
3. The written/driving test followed by interview may 23 Jul 2015 (Thursday), depending on the number of School. Only candidates, who qualify in the written & the Interview Board, will be eligible to appear in	candidates reporting to driving test, as decided by								
4. You may please note that this is only a call interview and in no way guarantees your selection for twill be paid for your journey to attend the interview	he above post. No TA/DA								

The candidates are required to bring the attached data sheet duly filled

(RK Sharma)

Capt (IN) Principal

and signed while coming to attend the written test-cum-interview on 22 Jul 2015

approach/ interference may result in your disqualification.

5.

(Wednesday).

Encl: As stated above.

SAINIK SCHOOL SUJANPUR TIRA (HP) APPLICATION FORMAT

(PLEASE FILL IN THE FORM IN BLOCK CAPITAL LETTERS)

Ар	plicatio	n for the pos	t of :	<u>DRIVER</u>							
1.	Name		:						ОТО		
2.	Father's/Husband's Name: PHOTO-GRAPH										
3.	. Date of birth / Age :										
4.	Marital	Status :									
5.	Addres	ss :									
							 PIN				
6.	Contac	t No. :			······································						
7.	Educat	Educational /Professional Qualifications :									
-	S. No.	Exam Pa		Board/University			Year	Year %age of Marks			
	(a)	Matric						1	naiks		
	(b)	Plus 2									
	(c)	Any other									
	Degree/ Diploma										
8.	Dotoilo	of Driving Lic	ongo i	Liconco No							
0.	Details	or briving Lic	CIISC .		· ····· f Vehicles:						
				2.							
9.	Experience, if any ; Ser Post Held Name of Organization/ Institution				Peri	Period of Service Total					
		1 001 11010	rtarro	or Organization motitution		1 011	From - To		No. of Years		
									rears		
10.	Any oth	ner informatio	n :								
	·										
Da	to :				Cianature of C	ondidata					
υa	ເ ບ				Signature of Control Name						